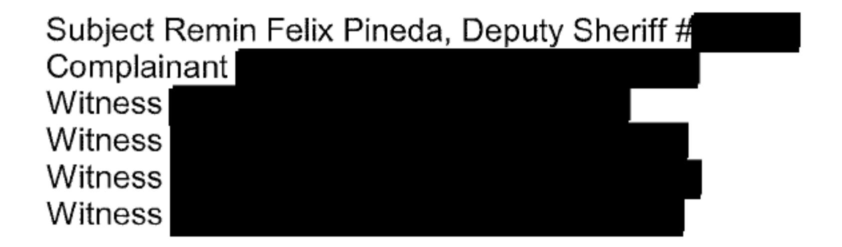
Table of Contents

IV 2246572

Personnel Investigation Form

Subject Remin Felix Pineda, Deputy Sheriff #[redacted]

Interviews:



Subject Remin Felix Pineda, Deputy Sheriff #[redacted]
Complainant [redacted]
Witness [redacted]
Witness [redacted]
Witness [redacted]
Witness [redacted]

Exhibit:

None

Miscellaneous Documents

In-Service for EM Shift 07-07-09-09
Inmate Injury Report
A - 231 Bench Log
Supervisor's Report on Use of Force (SH-R-438P)
IAB Mandatory Notification Form
Administrative Rights Subjects Form



County of Los Angeles
Sheriff's Department Headquarters
4700 Ramona Boulevard
Monterey Park, California 91754-2169



January 21, 2010

Deputy Remin Felix Pineda, #[redacted]

Dear Deputy Pineda:

You are hereby notified that it is the intention of the Sheriff's Department to suspend you without pay from your position of Deputy Sheriff, Item No. 2708A, with this Department for a period of five (5) days.

An investigation under IAB File Number 2246572, conducted by Inmate Reception Center, coupled with your own statements, has established the following:

1. That in violation of Manual of Policy and Procedures Sections 3-01/025.10, Unreasonable Force and/or 3-01/050.10, Performance to Standards, on or about July 8, 2009, you lost your temper when an inmate was being verbally uncooperative and then slapped the inmate, once, in the face with the back of your hand. Thus, you failed to conform to the work standards established for your position as a deputy sheriff.

Prior to determining this disciplinary action, I have thoroughly reviewed the incident and your record with this Department.

You have the right to grieve this disciplinary action within ten (10) business days of receipt of this letter. Your grievance procedures may be found in your classification's negotiated Memorandum of Understanding.

Failure to respond to this Letter of Intent within ten (10) business days will be considered a waiver of your right to grieve and will result in the imposition of this discipline indicated herein.

The Sheriff's Department reserves the right to amend and/or add to this letter.

Sincerely,

LEROY D. BACA, SHERIFF

Original Signed

Gerald K. Cooper, Captain
Commander, Inmate Reception Center

GKC:KM:bs

c: Advocacy Unit
Employee Relations Unit
Alexander R. Yim, Chief, Correctional Services Division
Internal Affairs Bureau
Office of Independent Review (OIR)
(File # IAB 2246572)

I certify that on the date indicated below, I received the original of the attached Letter of Intent under File Number ***IAB 2246572.***

01/21/2010

Date

REMIN FELIX PINEDA, #[redacted]

I certify that on the date indicated below, I served the original Letter of Intent to ***REMIN FELIX PINEDA.***

1/21/10

Date

#[redacted]

WITNESS SIGNATURE

Kevin Kuykendall

WITNESS PRINT

Please return this page within two (2) business days to:

BRENDA STEWART
Internal Affairs Bureau
4900 S. Eastern Ave. [redacted]
Commerce CA 90040
[redacted]



Leroy D. Baca, Sheriff

County of Los Angeles
Sheriff's Department Headquarters
4700 Ramona Boulevard
Monterey Park, California 91754-2169



January 25, 2012

Deputy Remin Felix Pineda, #[redacted]

Dear Deputy Pineda:

On January 21, 2010, you were served with a Letter of Intention, indicating your right to respond to the Sheriff's Department's pending disciplinary action against you, as reported under IAB File Number 2246572. You were also advised of your right to review the material on which the discipline was based.

You did not exercise your right to respond. The grievance period involved has now elapsed, with no change in discipline.

You are hereby notified that you are suspended without pay from your position of Deputy Sheriff, Item No. 2708A, with this Department for a period of five (5) days effective January 30, 2012 through February 3, 2012.

An investigation under File Number IAB 2246572, conducted by Inmate Reception Center, coupled with your own statements, has established the following:

1. That in violation of Manual of Policy and Procedures Sections 3-01/025.10, Unreasonable Force and/or 3-01/050.10, Performance to Standards, on or about July 8, 2009, you lost your temper when an inmate was being verbally uncooperative and then slapped the inmate, once, in the face with the back of your hand. Thus, you failed to conform to the work standards established for your position as a deputy sheriff.

Prior to imposing this disciplinary action, I have thoroughly reviewed the incident and your record with this Department.

You will hereby take notice that any future acts of misconduct may result in more severe disciplinary action.

The Sheriff's Department reserves the right to amend and/or add to this letter.

Sincerely,

LEROY D. BACA, SHERIFF

Original Signed

Chuck Antuna, Captain
Commander, Inmate Reception Center

Note: Attached for your convenience are excerpts of the applicable areas of the Manual of Policy and Procedures.

CA:JBN:jp

c: Advocacy Unit
Alexander R. Yim; Chief, Correctional Services Division
Internal Affairs Bureau
Personnel Administration
Office of Independent Review (OIR)
Inmate Reception Center/unit Personnel File

3-01/025.10 UNREASONABLE FORCE

Department members shall use only that force which is objectively reasonable. Unreasonable force is that force that is unnecessary or excessive given the circumstances presented to Department members at the time the force is applied. Unreasonable force is prohibited. The use of unreasonable force will subject Department members to discipline and/or prosecution.

Head strikes with an impact weapon are prohibited unless circumstances justify the use of deadly force.

04/01/96 MPP

3-01/050.10 PERFORMANCE TO STANDARDS

Members shall maintain sufficient competency to properly perform their duties and assume the responsibilities of their positions. Members shall perform their duties in a manner which will tend to establish and maintain the highest standard of efficiency in carrying out the functions and objectives of the Department.

Incompetence may be demonstrated by:

A lack of knowledge of the application of laws required to be enforced,

An unwillingness or inability to perform assigned tasks,

Failure to conform to work standards established for the member's rank or position,

Failure to take appropriate action on the occasion of a crime, disorder or other condition deserving police attention,

Absence without leave,

Unnecessary absence from an assigned area during a tour of duty.

In addition to the above, the following will be considered to be prima facie evidence of incompetence:

Repeated poor evaluations,

A written record of repeated infractions of the Department's rules, regulations, manuals or directives.

04/01/96 MPP

I certify that on the date indicated below, I received the original of the attached LETTER OF SUSPENSION under File Number *IAB 2246572* as set forth in Section 18.01 of the Rules of the Los Angeles County Civil Service Commission.

01/25/12
DATE

REMIN FELIX PINEDA
/#[redacted]

I certify that on the date indicated below, I served the original of the attached letter of suspension on *REMIN FELIX PINEDA* as set forth in Section 18.01 of the Rules of the Los Angeles County Civil Service Commission.

1-25-12
DATE

WITNESS SIGNATURE

ERIC SMITSON
WITNESS PRINT

Please return this page along with
Timekeeping Notification within
two (2) business days to:

JACQUELINE POWELL
INTERNAL AFFAIRS BUREAU
4900 S. EASTERN AVE. #[redacted]
CITY OF COMMERCE CA 90040

Los Angeles County Sheriff's Department

Supervisor's Report on Use of Force

Incident Information

URN: 509-01179-5120-505	Date: 7/8/09	Time: 2354 Hrs	
Location: Module 231, Reference #5120-2009-0709-100	City or Station: Los Angeles		
Bureau/Station/Facility: INMATE RECEPTION CENTER	Admin. Investigation: YES ☒ NO ☐		
Type of Force: Significant (Personal Weapons, Complaint of Pain)			
Deputy Injury: YES ☐ NO ☒	Suspect Injury YES ☒ NO ☐		
☐ Call	☒ Observation	☐ Detail	☐ Foot Pursuit ☐ Vehicle Pursuit
IAB Notified: YES ☒ NO ☐	Person Notified: Lt. R. Kusch	Emp: [redacted]	IAB Roll Out: YES ☐ NO ☒

Involved Employee

E1

Employee # [redacted]	Last Name PINEDA	First Name REMIN	Middle Name
Sex: ☒ Male ☐ Female	Race: F	Unit of Assignment: INMATE RECEPTION CENTER	Work Assignment (Unit #, Module, etc.): 231
Shift: ☒ EM ☐ Day ☐ PM	☒ Regular Shift ☐ OT Shift ☐ Off Duty	Age: 24	Height: 5-6 / Weight: 184
☐ Injured ☐ Treated ☐ Admitted	Hospital:	Coroner Case #	Directed Force ☐ Significant Force ☒

E__

Employee #	Last Name	First Name	Middle Name
Sex: ☐ Male ☐ Female	Race:	Unit of Assignment:	Work Assignment (Unit #, Module, etc.):
Shift: ☐ EM ☐ Day ☐ PM	☐ Regular Shift ☐ OT Shift ☐ Off Duty	Age:	Height: / Weight:
☐ Injured ☐ Treated ☐ Admitted	Hospital:	Coroner Case #	Directed Force ☐ Significant Force ☐

E__

Employee #	Last Name	First Name	Middle Name
Sex: ☐ Male ☐ Female	Race:	Unit of Assignment:	Work Assignment (Unit #, Module, etc.):
Shift: ☐ EM ☐ Day ☐ PM	☐ Regular Shift ☐ OT Shift ☐ Off Duty	Age:	Height: / Weight:
☐ Injured ☐ Treated ☐ Admitted	Hospital:	Coroner Case #	Directed Force ☐ Significant Force ☐

☐ **Additional Involved Employees**

On Duty Supervisor

Emp. #	Last Name	First Name	Middle Name	Rank	Present	Witness to Incident
[redacted]	[redacted]	[redacted]		Sgt.	YES ☐ NO ☒	YES ☐ NO ☒
					YES ☐ NO ☐	YES ☐ NO ☐

Watch Sergeant

Emp. #	Last Name	First Name	Middle Name
[redacted]	Hackett	Anthony	

Watch Commander

Emp. #	Last Name	First Name	Middle Name
[redacted]	Francisco	Holly	

LT. Holly Francisco — Watch Commander **(Print Name)**

[signature] — Watch Commander's **Signature**:

[redacted] — Emp #:

8-12-09 — Date

[redacted] — Supervisor Completing Form: **(Print Name)**

[redacted] — Emp #:

Copy Provided to Employee by: — Emp #:

Captain Gerald Cooper — Unit Commander **(Print Name)**

Unit Commander's **Signature**: — Emp #: — Date

DISCOVERY Use Only

FO# 2247882

Original: Discovery Unit
Copy: Unit Commander

SH-R-438P (Rev. 12/07)

Supervisor's Report on Use of Force
SUSPECT INFORMATION
509-01179-5120-505

Suspect Information

S 1

Last Name [redacted] First Name [redacted] Middle Name

AKA Last Name First Name Middle Name

Sex: [redacted] Male [redacted] Female | Race: W | Street Address: [redacted] | City: [redacted] | State & Zip Code: [redacted]

Work Phone: N/A | Home Phone: N/A | Age: 32 | Height: 5-11 | D.O.B. [redacted] | Weight: 155 | Armed? ☐

Booking #: [redacted] Primary Charge Code: 11350(A) H&S Secondary Charge Code: Criminal History ☒

EMT in attendance? ☐ YES ☒ NO Name: Unit: Phone #:

Hospital Admission? ☐ Rec'd Treatment At: Irc 231 Clinic Coroner Case #: Mental History ☐

By Doctor: Zasorin (IRC M.D.) Address: 450 Bauchet St., LA 90012 Phone #: [redacted]

Under Influence: ☐ YES ☒ NO Substance: Mental Illness ☐

Suspect Interview

Date: 07/09/09 | Time: 0108 Hrs | Audiotape: ☐ | Videotape: ☒ | Photos of Injuries: ☐

Suspect Information

S__

Last Name First Name Middle Name

AKA Last Name First Name Middle Name

Sex: ☐ Male ☐ Female | Race: | Street Address: | City: | State & Zip Code:

Work Phone: | Home Phone: | Age: | Height: | D.O.B. | Weight: | Armed? ☐

Booking #: Primary Charge Code: Secondary Charge Code: Criminal History ☐

EMT in attendance? ☐ YES ☐ NO Name: Unit: Phone #:

Hospital Admission? ☐ Rec'd Treatment At: Coroner Case #: Mental History ☐

By Doctor: Address: Phone #:

Under Influence: ☐ YES ☐ NO Substance: Mental Illness: ☐

Suspect Interview

Date: | Time: | Audiotape: ☐ | Videotape: ☐ | Photos of Injuries: ☐

Suspect Information

S__

Last Name First Name Middle Name

AKA Last Name First Name Middle Name

Sex: ☐ Male ☐ Female | Race: | Street Address: | City: | State & Zip Code:

Work Phone: | Home Phone: | Age: | Height: | D.O.B. | Weight: | Armed? ☐

Booking #: Primary Charge Code: Secondary Charge Code: Criminal History ☐

EMT in attendance? ☐ YES ☐ NO Name: Unit: Phone #:

Hospital Admission? ☐ Rec'd Treatment At: Coroner Case #: Mental History ☐

By Doctor: Address: Phone #:

Under Influence: ☐ YES ☐ NO Substance: Mental Illness ☐

Suspect Interview

Date: | Time: | Audiotape: ☐ | Videotape: ☐ | Photos of Injuries: ☐

☐ **Additional Suspects Involved**

Supervisor's Report on Use of Force
EMPLOYEE / NON-EMPLOYEE INFORMATION
509-01179-5120-505

Employee Witnesses

Emp. #	Last Name	First Name	Middle Name
Emp. #	Last Name	First Name	Middle Name
Emp. #	Last Name	First Name	Middle Name
Emp. #	Last Name	First Name	Middle Name
Emp. #	Last Name	First Name	Middle Name
Emp. #	Last Name	First Name	Middle Name

Non-Employee Witnesses

Last Name [redacted]	First Name [redacted]	Middle Name [redacted]	Age [redacted]	D.O.B. [redacted]
Street Address LA Transient	City	Zip Code	Work Ph. NONE	Home Ph. NONE
Last Name [redacted]	First Name [redacted]	Middle Name	Age [redacted]	D.O.B. [redacted]
Street Address [redacted]	City [redacted]	Zip Code 90012	Work Ph. NONE	Home Ph. NONE
Last Name [redacted]	First Name [redacted]	Middle Name [redacted]	Age [redacted]	D.O.B. [redacted]
Street Address [redacted]	City [redacted]	Zip Code [redacted]	Work Ph. NONE	Home Ph. [redacted]
Last Name [redacted]	First Name [redacted]	Middle Name	Age [redacted]	D.O.B. [redacted]
Street Address [redacted]	City [redacted]	Zip Code [redacted]	Work Ph. NONE	Home Ph. NONE
Last Name	First Name	Middle Name	Age	D.O.B.
Street Address	City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.
Street Address	City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.
Street Address	City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.
Street Address	City	Zip Code	Work Ph.	Home Ph.
Last Name	First Name	Middle Name	Age	D.O.B.
Street Address	City	Zip Code	Work Ph.	Home Ph.

☐ Additional Witness

Method

(AW) Arwen
(BC) Baton: (Control)
(BI) Baton: (Impact)
(BF) Bodily Fluids
(CN) Canine
(CR) Carotid Restraint
(CH) Choke Hold
(CT) Control Holds: (Control Techniques)
(TT) Control Holds: (Team Takedown)
(TD) Control Holds: (Takedown)
(CE) Chemical
(OC) Chemical Agents (OC Spray)
(TG) Chemical Agents (Tear Gas)
(EX) Explosives
(FH) Firearm (Handgun)
(FR) Firearm (Rifle)
(FS) Firearm (Shotgun)
(FO) Firearm (Other)
(FB) Flashbang
(FL) Flashlight
(OE) Other Weapon: Edged
(OV) Other Weapon: Vehicle
(OB) Other Weapon: Blunt Object
(OO) Other Weapon: Other
(PK) Personal Weapon: Feet/Leg: (Kick)
(PS) Personal Weapon: Feet/Leg: (Sweep)
(PH) Personal Weapon (Hand/Arm)
(PP) Personal Weapon (Push)
(PO) Personal Weapon (Other)
(RS) Resistance
(CN) Restraint Device (Capture Net)
(RH) Restraint Device (Handcuffs)
(HB) Restraint Device: Hobble (Legs Only)
(TP) Restraint Device: Hobble (TARP)
(RE) Restraint Device: REACT Belt
(SP) Sap
(SH) Shield
(SG) 37mm Stinger
(SB) Sting Ball
(ST) Stun Bag
(TR) Taser
(UC) Uncooperative

Type of Injury

(AB) Abrasion
(BR) Bruise
(BU) Burn
(CP) Complaint of Pain
(CO) Concussion
(DH) Death
(DI) Dislocation
(DB) Dog Bite
(FR) Fractures
(GS) Gunshot
(HB) Human Bite
(LC) Lacerations
(ND) Nerve Damage
(OD) Organ Damage
(PA) Paralysis
(PW) Puncture Wound
(SD) Soft Tissue Damage
(ST) Sprain/Twists
(UN) Unconscious
(RM) Refused Med Treatment
(NN) NONE

Body Part Injured

(AD) Abdomen
(AK) Ankle
(AR) Arm
(BK) Back
(BT) Buttocks
(CH) Chest
(EL) Elbow
(FA) Face
(FE) Feet
(FI) Fingers
(GE) Genitals
(GR) Groin
(HD) Hands
(HE) Head
(HI) Hip
(IN) Internal
(KN) Knees
(LE) Leg
(NK) Neck
(NO) Nose
(SH) Shoulder
(WR) Wrist

FORCE USED BY		FORCE USED AGAINST		Method (Code)	Type of Injury (Code)	Body Part (Code)
Name	E# or S#	Name	E# or S#			
I/M [redacted]	S#1	Dep. Remin Pineda	E#1	UC	NN	
Dep. Remin Pineda	E#1	I/M [redacted]	S#1	PH	CP	FA

Supervisor's Report on Use of Force
509-01179-5120-505

Force Applied

Significant (Personal Weapons, Complaint of Pain)

Incident Details

I/M [redacted] was handcuffed to a 231 bench due to his uncooperative behavior with medical staff. I/M [redacted] asked Dep. Pineda to use a restroom. Dep. Pineda escorted the inmate to 231 F-Pod, so he could use the restroom. Dep. Pineda told I/M [redacted] to come back to the Pod door after he used the restroom. Dep. Pineda found I/M [redacted] roaming around in F-Pod and he had not followed his instructions. Dep. Pineda escorted the inmate back to the bench. Dep. Pineda asked I/M [redacted] why he failed to follow his instructions. I/M [redacted] replied, "I thought I could stay in F-Pod." Dep. Pineda asked I/M [redacted] if he could remember what he had told him. I/M [redacted] did not answer Dep. Pineda's question. Dep. Pineda lost his temper and slapped I/M [redacted] once in the face with his right back hand. Dep. Pineda walked away and notified me (Sgt. [redacted]) of the incident.

Reported Use of Force by Involved Employee(s)

Deputy Pineda verbally notified me of the incident.

Witness Interview(s)

<u>I/M [redacted]' STATEMENT, [redacted]</u>
Lt. Francisco and myself contacted I/M [redacted] who was sitting next to I/M [redacted] at the time of the incident. He told us a deputy slapped the inmate once in the mouth area and walked away. This interview was video-taped by me, Sgt. [redacted].

<u>I/M [redacted]'S STATEMENT, [redacted]</u>
We contacted I/M [redacted] who also was sitting next to I/M [redacted] at the time of the incident. He told us a deputy brought I/M [redacted] back to the bench. He stated the deputy asked I/M [redacted] why didn't he come back to the bench after he used the restroom. I/M [redacted] replied he thought he could stay in the Pod. He said there was a pause and the deputy looked to the left and right. I/M [redacted] told us the deputy then slapped I/M [redacted] once in the face with his back hand and walked away. I/M [redacted] said he saw I/M [redacted] cover his face with his hand and a tooth in I/M [redacted]' hand. This interview was video-taped by me, Sgt. [redacted].

<u>I/M [redacted]'S STATEMENT, [redacted]</u>
We contacted I/M [redacted] who was sitting on the other side bench at the time of the incident. I/M [redacted] told us I/M [redacted] asked Dep. Pineda to use a restroom. Dep. Pineda took I/M [redacted] to the restroom. After a while, Dep. Pineda came back to the bench where I/M [redacted] was sitting. Dep. Pineda learned that I/M [redacted] did not come back to the bench. Dep. Pineda brought I/M [redacted] back to the bench. I/M [redacted] said I/M [redacted] handcuffed himself to the bench while Dep. Pineda was standing next to the inmate. I/M [redacted] stated Dep. Pineda was very upset for I/M [redacted] did not come back to the bench right away. He said Dep. Pineda stepped away and suddenly he turned toward the inmate and slapped the inmate once in the right side of the face with his right back hand. Dep. Pineda then walked away. This interview was video-taped by me, Sgt [redacted]

Supervisor's Report on Use of Force
509-01179-5120-505

I/M [redacted]' STATEMENT, [redacted]

We contacted I/M [redacted] who was on the floor at the time of the incident. Lt. Francisco asked him if he saw the incident. He said he did not see the incident at all. This interview was video-taped by me, Sgt. [redacted]

Suspect Interview(s)

Suspect Interview(s) Conducted By: ☒ **Watch Commander** ☒ **Supervising Sergeant**

I/M [redacted] was interviewed on camera by Lt. Francisco and me, Sgt. [redacted]. I/M [redacted] said a deputy punched him in the mouth and knocked out his tooth. I/M [redacted] said the deputy let him use a restroom and had him sat on the bench. He said the deputy then punched him in the mouth once. Lt. Francisco asked I/M [redacted] if he could describe the deputy. He said it was an officer, not a deputy, who wore a green uniform. He stated the officer was a middle aged bald man. This interview was video-taped by me, Sgt. [redacted].

Medical Review

[redacted]

Training & Tactical Review

☒ **Debriefing held to discuss training and tactical issues.**

During the debriefing of this incident we reviewed the force policy with Deputy Pineda.

Watch Commander's Review

Lieutenant Francisco requested an administrative investigation regarding this force incident (See IAB IV2246572).

Case Status

No criminal case was filed.